

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS   | ID NO. | DATE     |
|---------------------------|------------|--------|----------|
| FEE DETERMINATION         | VINW TRUNC |        | 04-10-01 |
| O.I.P.E. CLASSIFIER       |            | 8      | 5-4-01   |
| FORMALITY REVIEW          | TH         | 953    | 05-23-01 |
| RESPONSE FORMALITY REVIEW |            |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date    |
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| Final Original |         |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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Best Available Copy

11/05/01